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COMBINED DECLARATION FOR P Includes Reference to PCT International	Attorney' No. 4102	s Docket 2-58PUS					
As a below named inventor, I hereby dec	lare that:		L				
My residence, post office address and citi		my name.					
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
DEVICE AND METHOD FOR DETERMINING AN ALLOWED EXPOSURE OF HUMAN SKIN TO UV RADIATION							
the specification of which (check only one	e item helow)						
[] is attached hereto							
[] was filed as United States application							
Serial No.							
on							
and was amended							
on _ (if applicable).							
[x] was filed as PCT international application							
Number PCT/DE2004/001391							
on 1 July 2004							
and was amended under PCT Article 19							
on (if applica				i			
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
PRIOR FOREIGN/PCT APPLICATIONS AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:							
Country (if PCT, indicate "PCT")	Application Number	Date of Filing (day, month, year)	Priority (Under 35	Claimed 5 U.S.C.			
Germany	103 29 915.7	2 July 2003	[x] YES	[] NO			
PCT	PCT/DE2004/001391	1 July 2004	[]YES	[] NO			
			[]YES	[] NO			
			[] YES	[] NO			
			[]YES	[] NO			
			[] YES	IINO			

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Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

Attorney's Docket 4102-58PUS

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) at *Cohen, Pontani, Lieberman & Pavane* to prosecute this application and transact all business in the Patent and Trademark Office connected therewith

Customer number 27799

Send correspondence to: Cohen, Pontani, Lieberman & Pavane at the address for the following customer Number: 27799

Direct Telephone calls to: (name and telephone number) Thomas C. Pontani (212) 687-2770

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

2	FULL NAME OF INVENTOR	FAMILY NAME HAHL	FIRST GIVEN NAME Markus	SECOND GIVEN NAME
0 1	RESIDENCE, CITIZENSHIP	CITY Peiss	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Molkereistrasse 3	CITY Peiss	STATE & ZIP CODE/COUNTRY Germany 85653
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0 2	RESIDENCE, CITIZENSHIP	СІТҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	СІТҮ	STATE & ZIP CODE/COUNTRY
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
$\begin{vmatrix} 2\\0\\3 \end{vmatrix}$	RESIDENCE, CITIZENSHIP	СІТҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY

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SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203			
DATE	DATE	DATE			
Additional inventor(s) name(s) & address(es) attached? [] Yes [x] No					